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Bib Data Sheet

CONFIRMATION NO. 9585

SERIAL NUMBER 10/734,732	FILING DATE 12/12/2003 RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 1118/191
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/433,570 12/13/2002

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/05/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>Matthew H. Lee</i> Initials <i>ML</i>	STATE OR COUNTRY MA	SHEETS DRAWING 6	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
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TITLE

Vibratory venous and arterial oximetry sensor

FILING FEE RECEIVED 595	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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